NOV 2 1 2006

NOV 2 10 SEPTEMBER OF PURIFORM

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

			/
OMB	APPR(
OMB Num	ber:	32	35-0076
Expires:	April	30,	2008
Estimated	averag	e bui	den
hourspern	espons	0	16.00

1382787

SEC USE ONLY										
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0,	DATE RECEIVED									
	1 1									

		l		
Name of Offering (me has changed, as	nd indicate change.)		
Filing Under (Check box(es) that apply): Rule 504 1	Rule 505 🗶 Ru	le 506 Section 4(6)	ULOF	
Type of Filing: New Filing Amendment	, <u></u>			######################################
A.,E	BASIC IDENTIFIC	CATION DATA		
1. Enter the information requested about the issuer				3063235
Name of Issuer (check if this is an amendment and name	has changed, and i	ndicate change.)		
AmREIT Monthly Income & Growth Fund IV, L.P			1	
i	Sumber and Street,	City, State, Zip Code)	Telephone Number (Inc	cluding Area Code)
8 Greenway Plaza, Suite 1000, Houston, TX 77046			713-850-1400	
Address of Principal Business Operations (if different from Executive Offices)	Number and Street	City, State, Zip Code)	Telephone Number (In	iclusing Area Code)
Brief Description of Business			P	ROCESSED
Actively managed real estate investment fund		' 		HOOFOOED
Type of Business Organization	nia alamata Suama		olease specify):	DEC 1 1 2006
comporation limited partners! limited partners!	hip, already formed hip, to be formed		d liability partnership	THE TOUR
Actual or Estimated Date of Incorporation or Organization:	tonth Year 110 06	X Actual Estir		FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-lette CN for Canad	r U.S. Postal Servi la; FN for other for		: DE	
GENERAL INSTRUCTIONS				
Federal:				
Who Must File: All issuers making an offering of securities in re 77d(6).	liance on an exemp	tion under Regulation Do	or Section 4(6), 17 CFR 230	.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days aft and Exchange Commission (SEC) on the earlier of the date it is which it is due, on the date it was mailed by United States regi	received by the SF	C at the address given b		
Where To File: U.S. Securities and Exchange Commission, 45	0 Fifth Street, N.W	., Washington, D.C. 20	549.	
Copies Required: Five (5) copies of this notice must be filed w photocopies of the manually signed copy or bear typed or print		f which must be manuall	ly signed. Any copies not n	nanually signed must be
Information Required: A new filing must contain all information thereto, the information requested in Part C, and any material change the filed with the SEC.				
Filling Fee: There is no federal filling fee.				
State:	į			
This notice shall be used to indicate reliance on the Uniform I ULOE and that have adopted this form. Issuers relying on U are to be, or have been made. If a state requires the paymen accompany this form. This notice shall be filed in the appropriate notice and must be completed.	LOE must file a set of a fee as a preopriate states in acc	eparate notice with the so oudition to the claim for ordance with state law.	Securities Administrator in r the exemption, a fee in t	reach state where sales he proper amount shall
	ATTENT		•	
Failure to file notice in the appropriate states will appropriate federal notice will not result in a loss filing of a federal notice.				
•				

A. BASIC IDENTIFICATION DATA > '×;'', Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Recefficial Owner X Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) H. Kerr Taylor Business or Residence Address (Number and Street, City, State, Zip Code) 8 Greenway Plaza, Suite 1000, Houston, TX 77046 Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Braun, Chad C. Business or Residence Address (Number and Street, City, State, Zip Code) 8 Greenway Plaza, Suite 1000, Houston, TX 77046 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Purtner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Lust name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: Promoter General and/or Managing Partner Fell Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Fell Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

30				7 45	↓B.: 1	NFORMAT	ION ABOU	T OFFERI	NĞ 🥻				A 32
1	Unetha	icour cole	l ardassi	ha izenas ir	ntand to ea	ll to non-n	conditál i	ntedare in	thic offeri	?		Yes	No res
1.	rtas uic	122net 2016	ı, or aves a			• '	1			-	************	U	LAJ
2.	What is	the minim	um investn					-				S 25	,000
		*				ł						Yes	No
3.			-										
4.	commis If a pers or states a broke	sion or sim on to be lis t, list the na r or dealer,	ilar remune ded is an as ame of the b , you may s	eration for s sociated pe proker or de set forth the	solicitation erson or age ealer. If me	of purchase ent of a brob ore than five	ers in conne ter or deale t (S) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	ne offering. with a state	!	
Full	Name (Last name	first, if ind	ividual)		į t							
Bus	iness or	Residence	Address (N	lumber wi	I Street, C	ly, State, Z	ip Code)						
Nan	ne of Ass	ociated Br	oker or De	aler		·				······			* * # # # # # # # # # # # # # # # # # #
Stat	es in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	a" or check	individual	States)			********	••••••	······································		☐ All	States
	AL IL MT RI	AK IN NE SC	AZ IA RV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (I	ast name	first, if ind	i vidual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)			***************************************			
Nan	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?												
Stat	es in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)			********	******	- 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7		☐ All	States
	IL MT RI	NE SC	IA NV SD	KS NH TN	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO)
Full	Name (I	ast name	first, if ind	ividual)	· ·	ı I							
Bus	iness or	Residence	Address (1	Yumber an	d Street, C	City, State,	Zip Code)						
Nan	ne of Ass	ociated Br	oker or De	aler			Ì	 					
Stat	es in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All States	" or check	individual	States)!				*************			☐ All	States
	MT	NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC .	MA ND	OH)	MN OK	MS OR	MO PA

1.	Enter the aggregate offering price of securities included. Enter "0" if the answer is "none" or "zero." this box and indicate in the columns below the already exchanged.	If the transaction	is an exchange offering, check			
	Type of Security			Aggregate Offering Price	Amo	ount Already Sold
	Debt			S 0	s	0
	Equity					0
		1	Preserred			
	Convertible Securities (including warrants)		—	s 0	s	0
	Partnership Interests		1		- ³ S	0
	•	i	1		· ·	
	Other (Specify)				. <u>\$</u>	0
				S <u>100,000,000</u>	_ \$	0
2.	Answer also in Appendix, Column Enter the number of accredited and non-accredited offering and the aggregate dollar amounts of their p the number of persons who have purchased secu	d investors who ha nurchases. For off rities and the ag	lye purchased securities in this grings under Rule 504, indicate gregate dollar amount of their			
	purchases on the total lines. Enter "0" if answer is	"none" or "zero.				Anomouta
		1		Number Investors	Do	Aggregate llar Amount Purchases
	Accredited Investors		 	00	\$_	0
	Non-accredited Investors			0		0
	Total (for filings under Rule 504 only	` ``				
	Answer also in Appendix, Col					
3.	If this filling is for an offering under Rule 504 or 505 sold by the issuer, to date, in offerings of the types first sale of securities in this offering. Classify se	, enter the informa indicated, in the t	 tion requested for all securities welve (12) months prior to the			
	Type of Offering			Type of Security	Do	llar Amoun Sold
	Rule 505			•	s	3010
	Regulation A		1		 د	
	Rule 504					
	ì				٠ <u>.</u>	
	Total		 		\$	· · · · · · · · · · · · · · · · · · ·
1	a. Furnish a statement of all expenses in conne securities in this offering. Exclude amounts relati The information may be given as subject to future not known, furnish an estimate and check the box	ng solely to organi contingencies. If t	zation expenses of the insurer. he amount of an expenditure is			
	Transfer Agent's Fees			···-· 🔀	\$	100,000
	Printing and Engraving Costs		wexxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	IX	\$	300,000
	Legal Fees			X] S	500,000
	Accounting Fees		ļ		s	100,000
	Engineering Fees			X	\$	0
	Sales Commissions (specify finders' fees sep-					,255,000
	Other Expenses (identify) Dealer Manager/L					3,750,000
	· · · · · · · · · · · · · · · · · · ·			-		

C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS *

C. OFFERING PRICE.		

a de la companya de l

	•	•	1				
-	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This	difference is the "adjusted gros	Š		\$ <u>8</u>	7,995,000
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ry purpose is not k Ethe payments liste	nown, furnish an estimate and a must equal the adjusted gros	ď	-		
		1		O Din	ments to fficers, ectors, & iliates	P	ayments to
	Salarias and Care	1			0		Outers 0
	Salaries and fees				0	X \$-	
				X 3	<u> </u>	X S_	0
	Purchase, rental or leasing and installation of ma			ſ ₹ IS	0	XIS_	0
	Construction or leasing of plant buildings and fac		1				0
	Acquisition of other husinesses (including the val	Ţ		Δι +	.	· (A) ~-	
	offering that may be used in exchange for the assi	ets or securities of	another		_		
	issuer pursuant to a merger)		1	_		₩ \$_	0
	Repayment of indebtedness				0	XIS_	0
	Working capital	·	 	X S	0	X \$_	1,000,000
	Other (specify): Acquisition/Development of Real	Estate		X \$	0	XIS_	86,995,000
		Ì	İ				
				X s	0	X S_	0
	Column Totals			2 101	0	I ⊽7 €	87,995,000
	(1					
	Total Payments Listed (column totals added)	1	<u></u>		∑ \$ <u>8</u>	7,995,0	00
2		D. FEDERAL	SIGNATURE	2 4		·	
<u> </u>		1			4 1		
sigi	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	mish to the U.S. Se	curities and Exchange Commi	ssion, u	pon writte		
SSL	uer (Print or Type)	Signature		Date			
Αn	REIT Monthly Income & Growth Fund IV, L.P.	455		Noven	nber 20, 2	2006	
	ne of Signer (Print or Type)	Title of Signer (1	rint or Type)				
Ch	ad C. Braun	Chief Financial	Officer				
					·		
			1				
		1	1				
		1	1				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	as the state of th	E. STATES	SIGNATURE .			
1.	Is any party described in 17 CFR 230.26 provisions of such rute?				Yes	No X
•	in the second se	See Appendix, Colum	n 5, for state response.			
2.	The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as required.		administrator of any state i	n which this notice is fil	led a no ti	ce on Forn
3.	The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the stat	e edministrators, upon wr	itten request, informati	on furni:	shed by the
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the hurden of establishment.	he state in which this n	otice is filed and understa	nds that the issuer clain		
	er has read this notification and knows the c horized person.	contents to be true and b	nas duly caused this notice	o be signed on its behal	f by the t	m ders i gne
Issuer (I	Print or Type)	Signature	7 2	Date		
AmREI	T Monthly Income & Growth Fund IV, I	LP		November 20, 20	006	
Name (I	Print or Type)	Titl (Print or T),bc)		•	
Chad C	. Braun	Chief Financia	Officer			
Issuer (I AmREI Name (I	horized person. Print or Type) T Monthly Income & Growth Fund IV, I Print or Type)	Signature L.P. Titl (Print or T	ype)	Date	•	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

APPENDIX

1	Intend to non-a investor	i to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Enter Security Name Here	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	i i	х	\$100,000,000	!					х
ΛK	P	х	\$100,000,000						х
ΛZ		х	\$100,000,000						х
AR	· · · · · · · · · · · · · · · · · · ·	x	\$100,000,000	j					x
СЛ	1,	х	\$100,000,000	1					х
co		· x	\$100,000,000						Х
cr		х	\$100,000,000	l i					х
DE	r	х	\$100,000,000	i					X
DC	;	х	\$100,000,000	<u>,</u>					X
Fl.	ř	х	\$100,000,000	!					х
GΛ		Х	\$100,000,000	! !					х
ні		х	\$100,000,000	! !					х
Œ	,	X	\$100,000,000	İ					Х
11.	;	х	\$100,000,000	•					х
IN	1	Х	\$100,000,000	! 	1				Х
IA		Х	\$100,000,000	,		•			х
KS		х	\$100,000,000	<u>.</u>					х
KY		х	\$100,000,000	†					х
LA		Х	\$100,000,000	i 					Х
ME	:	x	\$100,000,000	! :			-		х
MD		х	\$100,000,000	· -	į į				х
МΛ		х	\$100,000,000	ţ					х
МІ		х	\$100,000,000	1					х
MN	i	х	\$100,000,000	1 1	l .				х
MS		х	\$100,000,000						х

APPENDIX

1	Intend to non-a investor	2 I to sell accredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Enter Security Name Here	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО	į	х	\$100,000,000		-				Х
мт		х	\$100,000,000						х
NE		x	\$100,000,000						x
NV		х	\$100,000,000						X
NH		х	\$100,000,000						х
lи	!	X	\$100,000,000						х
NM		х	\$100,000,000	:					х
NY		X	\$100,000,000						x
NC	·	Х	\$100,000,000	1					х
ND		x	\$100,000,000						х
ОН		х	\$100,000,000						х
ок		х	\$100,000,000						х
OR		Х	\$100,000,000						X
PA		Х	\$100,000,000			·			x
RI		x	\$100,000,000						х
sc		Х	\$100,000,000						х
SD		х	\$100,000,000						х
TN		Х	\$100,000,000	-					х
тх		х	\$100,000,000						Х
UT		х	\$100,000,000						х
VT		х	\$100,000,000						х
٧٨	:	X	\$100,000,000						x
W۸		х	\$100,000,000						х
wv		х	\$100,000,000						x
WI	·	x	\$100,000,000	-					x

1.		2	3			4		5		
,	to non-a	i to sell accredited es in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Enter Security Name Here	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		х	\$100,000,000	l L					х	
PR	:	x	\$100,000,000	1					Х	